

TRANSMITTAL FORM

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/506,560
	Filing Date	September 2, 2004
	First Named Inventor	Leif Petersen
	Group Art Unit	2618
	Examiner Name	Chen, Junpeng
	Attorney Docket Number	CM00443C
Total Number of Pages in this Submission		17

ENCLOSURES

(check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawings – 1 Replacement Sheet – Figs. 4-6 <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs ____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC {Appeal Notice, Brief, Reply Brief} <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Barbara R. Doutre	Registration No.	39,505
Signature	/Barbara R. Doutre/		
Date	April 30, 2007		

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